Case 16-13013	DOC I	 Page 1 of 50	Desc Main	5/03/18 12:25PM
ation to identify your ca	se:			

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	<b>Leora</b> First name	First name
	example, your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Porter Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8680	

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Debtor 1 Leora Porter

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	14442 Abbottsford St	If Debtor 2 lives at a different address:
		Midlothian, IL 60445  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	The chapter of the								
	Bankruptcy Code you are choosing to file under								
		Chapter 7							
		☐ Chap							
		☐ Chap							
		☐ Chap	iter 13						
	How you will pay the fee	ab or	out how y	ou may pay. Typica attorney is submitt	lly, if you are paying the fee yo	k with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
					ments. If you choose this option	on, sign and attach the Application for Individuals to Pay			
		bu ap	it is not rec plies to yo	quired to, waive you our family size and y	or fee, and may do so only if yo you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
	Do you rent your residence?	□ No.		line 12.					
١.		V	Has y	our landlord obtaine	ed an eviction judgment agains	it you?			
		Yes.							
ı.		■ Yes.		No. Go to line 12.					

Main

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Porter			Case number (if known)	

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprieto	r		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	& ZIP Code		
	it to this petition.		Chec	k the appropriate box	to describe your business:		
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	deadlines	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	ı am r	not filing under Chapte	er II.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	iling under Chapter 11	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs	■ No.	If immed needed,	the hazard?  diate attention is why is it needed?  s the property?			
	urgent repairs?			1	Number, Street, City, State & Zip Code		

Debtor 1 Leora Porter

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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DUL	Leora Porter				IIDEI (II KIIOWII)				
Par	6: Answer These Questi	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  ☐ No. Go to line 16b.						
			_						
		16b.	■ Yes. Go to line 17.  Are your debts primarily business debts? Business debts are debts that you incurred to obtain						
		100.		vestment or through the operation of the b					
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	owe that are not consumer debts or busing	ness debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pavailable to distribute to unsecured creditors	roperty is excluded and administrative expenses ors?				
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		<b>5</b> 001-10,000	<b>5</b> 0,001-100,000				
	one.	□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you	■ \$0 - \$50,000		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	<b>\$0 - \$</b>	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion				
		_ ' '	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	t7: Sign Below								
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the int	formation provided is true and correct.				
				7, I am aware that I may proceed, if eligit relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.				
				I not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the	chapter of title 11, United States Code, s	specified in this petition.				
		bankrupt and 357	cy case can result in fines up I.		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Leora F	ra Porter Porter e of Debtor 1	Signature of De	btor 2				
		Executed	d on <b>May 3, 2018</b>	Executed on					
			MM / DD / YYYY		MM / DD / YYYY				

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Debtor 1 Leora Porter

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph	r F Lentner	Date	May 3, 2018
Signature of	f Attorney for Debtor		MM / DD / YYYY
Joseph F	Lentner		
Printed name			
	& Desai, LLC		
Firm name			
2314 W No	orth Ave Unit C-1W		
Chicago, I	L 60647		
	City, State & ZIP Code		
Contact phone	312-666-7882	Email address	kswanson@swansondesai.com
6291735 IL	L		
Bar number & S	itate		

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Fill in this informa	ation to identify your o	case:		
Debtor 1	Leora Porter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

Par	t 1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,310.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	17,310.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	18,867.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	23,708.00
	Your total liabilities	\$	42,575.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,226.84
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,204.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bayashed purposes," 14.11.5.0. \$ 10.1(0). Fill out lines 8.0s for statistical purposes, 28.11.5.0. \$ 150.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,196.00 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Desc Main Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 5/03/18 12:25PM Document Page 10 of 50 Fill in this information to identify your case and this filing: Debtor 1 **Leora Porter** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Toyota Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: Venza Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Debtor 2 only Current value of the Current value of the 60000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$16,100.00 \$16,100.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$16,100.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com Schedule A/B: Property

Dobtor 1		3013 Doc 1	Filed 05/03/18 Document	Entered 05/03/18 12 Page 11 of 50		Desc Main	5/03/18 12:25PN
Debtor 1	Leora Porter			Case number	∌I (If KNOWN)		
■ Yes.	Describe						
		used household g Furniture	oods, pots pans dis	hses, small appliances,			\$250.00
□ No	les: Televisions and	I radios; audio, video, hones, cameras, med		oment; computers, printers, scanno	ers; music co	ollections; electro	nic devices
		used consumer el	ectronics, tv, cell ph	none,			\$200.00
■ No □ Yes.  9. Equipm	other collection  Describe  ent for sports and	s, memorabilia, collec	xtibles	oks, pictures, or other art objects;	·		
■ No	es: Sports, photogramusical instrum		other hobby equipment;	bicycles, pool tables, golf clubs, sk	iis; canoes a	and kayaks; carpe	entry tools;
■ No		shotguns, ammunition	n, and related equipmen	t			
□ No		nes, furs, leather coats	s, designer wear, shoes	, accessories			
		used clothing					\$200.00
■ No □ Yes.  13. Non-fa Examp ■ No □ Yes.	bles: Everyday jewe Describe brm animals bles: Dogs, cats, bir Describe	ds, horses		ding rings, heirloom jewelry, watch		old, silver	
■ No	Give specific inform		, ,		ı		1
		•	om Part 3, including a	ny entries for pages you have at	tached		\$650.00
	scribe Your Financia vn or have any leg		est in any of the follow	ing?		Current val portion you Do not dedu claims or ex	u own? uct secured

Deb	tor 1		8-13013	Doc 1	Filed 05/0 Docume		Entered 05/03/18 12:19:56 Page 12 of 50 Case number (if known)	Desc Main	5/03/18 12:25PM
16. <b>(</b>	Cash Example No		ou have in yo		our home, in a sa		sit box, and on hand when you file your petitic	on	
							Cash		\$80.00
	Exampi ] No		g, savings, or ns. If you hav		counts with the sa		f deposit; shares in credit unions, brokerage h itution, list each. ame:	ouses, and other s	similar
			17.1.	Checking a	account TC	F			\$80.00
			17.2.	Savings	Chi	icago F	Post office credit union		\$400.00
_	Examp			ly traded stoo ent accounts w		ms, mon	ey market accounts		
	No Yes			Institution or is	ssuer name:				
_	Non-pu joint ve		d stock and	interests in in	corporated and	l uninco	orporated businesses, including an interest	in an LLC, partn	ership, and
		Give specific		about them ne of entity:			% of ownership:		
_	Negotia	able instrume	ents include p	ersonal check	s, cashiers' ched	cks, pron	egotiable instruments nissory notes, and money orders. by signing or delivering them.		
		Give specific		about them uer name:					
		nent or pens les: Interests			1(k), 403(b), thrif	t savings	s accounts, or other pension or profit-sharing p	blans	
	Yes. L	List each acc		ely. of account:	Inst	itution n	ame:		
			Pens	ion	Uni	ited sta	ate postal service		Unknown
	Your sh <i>Examp</i>		used deposit	s you have ma			inue service or use from a company tric, gas, water), telecommunications compan	ies, or others	
	No Yes				Inst	itution n	ame or individual:		
	_	es (A contrac	ct for a period	dic payment of	money to you, e	ither for	life or for a number of years)		
	No Yes		Issuer nam	e and descript	ion.				
2	6 U.S.C			n an account i and 529(b)(1).	n a qualified Al	BLE pro	gram, or under a qualified state tuition pro	gram.	
	No Yes		Institution n	name and desc	ription. Separate	ely file th	e records of any interests.11 U.S.C. § 521(c):		

		Case 18-13013	Doc 1	Filed 05/03/18 Document	Entered 05/03/18 12:19:56 Page 13 of 50_	Desc Main 5/03/18 12:256
De	ebtor 1	Leora Porter		Boodinent	Case number (if known)	
25.	Trusts, ■ No	equitable or future intere	sts in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
	☐ Yes.	Give specific information al	bout them			
26.		s, copyrights, trademarks, ples: Internet domain names				
	☐ Yes.	Give specific information al	bout them			
27.		es, franchises, and other of the state of th			n holdings, liquor licenses, professional licens	es
	_	Give specific information al	bout them			
Mo	oney or p	property owed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you				
		Give specific information ab	oout them, inc	cluding whether you alrea	ady filed the returns and the tax years	
	Examp  No	support  bles: Past due or lump sum a		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Examp  ■ No	benefits; unpaid loans	ty insurance p		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
		Give specific information				
31.		ts in insurance policies bles: Health, disability, or life	e insurance; h	nealth savings account (I	HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes. I	Name the insurance compa Comp	iny of each popany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you a	terest in property that is dare the beneficiary of a living the has died.	<b>ue you from</b> g trust, expec	someone who has die of proceeds from a life in:	ed surance policy, or are currently entitled to rece	eive property because
	☐ Yes.	Give specific information				
	Examp ■ No	against third parties, who les: Accidents, employmen Describe each claim			t or made a demand for payment to sue	
34.			ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
		Describe each claim				
35.	Any fin	ancial assets you did not	already list			

 $\square$  Yes. Give specific information..

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Case number (if known)

Document

36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$560.00
Part	5: Describe Any Business-Related Property You Own or Have an Intere	st In. List any real esta	ate in Part 1.	
87. <b>[</b>	Do you own or have any legal or equitable interest in any business-related	d property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	t 6: Describe Any Farm- and Commercial Fishing-Related Property You Off you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
16.	Do you own or have any legal or equitable interest in any farm- o	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
ı	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership  No  Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$16,100.00		
57.	Part 3: Total personal and household items, line 15	\$650.00		
58.	Part 4: Total financial assets, line 36	\$560.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$17,310.00	Copy personal property t	otal \$17,310.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$17,310.00

Debtor 1

**Leora Porter** 

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Fill in this infor	mation to identify your	case:			
Debtor 1	Leora Porter				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	_	
Case number (if known)					Check if this is an
					amended filing
Official Fo	rm 106C				

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	used clothing	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
	Line from Schedule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
	used consumer electronics, tv, cell phone,	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	used household goods, pots pans dishses, small appliances, Furniture	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
	Ellio Holli Golleddio Feb. 411			100% of fair market value, up to any applicable statutory limit	
	2013 Toyota Venza 60000 miles Line from Schedule A/B: 3.1	\$16,100.00		\$2,400.00	735 ILCS 5/12-1001(c)
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	☐ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
	You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	i.C. § 522(b)(3)	

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$80.00

Cash

\$80.00

Line from Schedule A/B: 11.1

Line from Schedule A/B: 16.1

Part 1: Identify the Property You Claim as Exempt

735 ILCS 5/12-1001(b)

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Debtor 1 **Leora Porter** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking account: TCF** 735 ILCS 5/12-1001(b) \$80.00 \$80.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Chicago Post office credit 735 ILCS 5/12-1001(b) \$400.00 \$400.00 union Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Pension: United state postal service 735 ILCS 5/12-1006 Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit

3.	Are you claim	ing a homestea	d exemption	of more than	\$160.3753
Ο.	Aic you olulli	iiiig a nomestet	ia exciliption	or more than	. φ. ου,υ. υ.

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

  - Yes

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5/03/18 12:25PM Page 17 of 50 Document Fill in this information to identify your case: Debtor 1 **Leora Porter** Middle Name First Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column C Column A Column B 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured that supports this much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the portion value of collateral. OneMain Financial \$18,867.00 \$16,100.00 \$2,767.00 Describe the property that secures the claim: Creditor's Name 2013 Toyota Venza 60000 miles As of the date you file, the claim is: Check all that Po Box 1010 apply Evansville, IN 47706 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured ■ Debtor 1 only ☐ Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit At least one of the debtors and another ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Opened 05/17 Last Active 6039 Date debt was incurred 3/30/18 Last 4 digits of account number \$18,867.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$18,867.00 Write that number here: Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? **2.1 OneMain Financial** Attn: Bankruptcy Last 4 digits of account number \_ 601 Nw 2nd Street

Official Form 106D

Evansville, IN 47708

	Cas	se 18-13013	Doc 1 F	Filed 05/03/18 Document	Entere Page 1	ed 05/03/18 12:19: 8 of 50	56 Des	sc Main	5/03/18 12:25PN
Fill in	this informa	ation to identify you	ur case:	Document	r aue 1	8 01 30			
Debto		Leora Porter							
Dobto	" '	First Name	Middle I	Name	Last Name	_			
Debto									
(Spouse	e if, filing)	First Name	Middle I	Name	Last Name				
United	d States Bank	cruptcy Court for the	: NORTHER	N DISTRICT OF ILL	INOIS				
Case	number								
(if knowr								heck if this	is an
							а	mended filii	ng
Offic	ial Form	106E/E							
			Who Hove	Unsecured (	Claima			4.	2/15
						Part 2 for creditors with NONF	DIODITY alai		
Schedu Schedu left. Atta	le G: Executo le D: Creditor ach the Conti	ry Contracts and Une s Who Have Claims S	expired Leases (Gecured by Prope	Official Form 106G). Do erty. If more space is n	not include eeded, copy	contracts on Schedule A/B: Pr any creditors with partially se the Part you need, fill it out, n do not file that Part. On the to	cured claims umber the en	that are list tries in the b	ed in oxes on the
Part 1	List All	of Your PRIORITY	Unsecured Cla	iims					
1. Do	any creditors	s have priority unsecu	ured claims agair	nst you?					
	No. Go to Par	t 2.							
	Yes.								
Part 2	List All	of Your NONPRIOR	RITY Unsecure	d Claims					
3. Do	any creditors	s have nonpriority un	secured claims a	gainst you?					
	No. You have	nothing to report in thi	s part. Submit this	s form to the court with y	our other sch	edules.			
	Yes.								
un: tha	secured claim,	list the creditor separa	tely for each clain	n. For each claim listed,	identify what t	b holds each claim. If a credito type of claim it is. Do not list clai three nonpriority unsecured cla	ms already inc	luded in Part	1. If more
								Total clain	n
4.1	Capital C	ne		Last 4 digits of acco	unt number	5235			\$567.00
	Nonpriority (	Creditor's Name							
		pital One Dr d, VA 23238		When was the debt i	ncurred?	Opened 10/15 Last A 04/18	ctive	-	
	Number Stre	eet City State ZIp Code	!	As of the date you fi	le, the claim i	is: Check all that apply			
	Who incurr	ed the debt? Check or	ne.						
	Debtor 1	only		☐ Contingent					
	Debtor 2	only		■ Unliquidated					
	Debtor 1	and Debtor 2 only		☐ Disputed					
	☐ At least of	one of the debtors and	another	Type of NONPRIORI	TY unsecure	d claim:			
		this claim is for a	ommunity	Student loans					
	debt Is the claim	subject to offset?		Obligations arising report as priority claim		aration agreement or divorce tha	t you did not		
	■ No			Debts to pension of	or profit-sharin	g plans, and other similar debts			

☐ Yes

Other. Specify Credit Card

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Debtor	1 Leora Porter	Case number (if know)	
4.2	Cash Net USA	Last 4 digits of account number	\$800.00
	Nonpriority Creditor's Name 200 West Jackson Suite 1400 Chicago, IL 60606-6941	When was the debt incurred?	·
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Certified Services Inc	Last 4 digits of account number 0907	\$115.00
	Nonpriority Creditor's Name 1733 Washington Street Waukegan, IL 60079	When was the debt incurred? Opened 8/01/11	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.4	Certified Services Inc	Last 4 digits of account number 416A	\$293.00
	Nonpriority Creditor's Name 1300 N Skokie Hwy Ste 10 Gurnee, IL 60031	When was the debt incurred? Opened 11/11	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Prairie Anesthesia Llc	

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1.5	Chgo Po Ecu	Last 4 digits of account number	7031	\$755.00
	Nonpriority Creditor's Name  10025 S Western Chicago, IL 60643	When was the debt incurred?	Opened 12/02/11 Last Active 9/30/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Check Cred	lit Or Line Of Credit	
1.6	Credit One Bank	Last 4 digits of account number	4247	\$1,766.00
	Nonpriority Creditor's Name Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 06/14 Last Active 12/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	■ Other. Specify Credit Card		
4.7	Dr Leonard's/Carol Wright Gifts Nonpriority Creditor's Name	Last 4 digits of account number	3A4A	\$175.00
	Po Box 2845 Monroe, WI 53566	When was the debt incurred?	Opened 1/16/12 Last Active 05/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	n plans, and other similar debts	
	■ No □ Yes	• •	• •	
	∟ res	Other. Specify Charge Acc	- Curit	

Debtor 1 Leora Porter

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Case number (if know)

First Premier Bank Nonpriority Creditor's Name  601 S Minnesota Ave Sioux Falls, SD 57104  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim in the contingent Incurred Incur	Opened 09/12 Last Active 11/17 is: Check all that apply	\$1,285.00
601 S Minnesota Ave Sioux Falls, SD 57104  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	As of the date you file, the claim  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured	11/17	
Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured	is: Check all that apply	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured		
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured		
<u>_</u>	☐ Disputed  Type of NONPRIORITY unsecured		
<u>_</u>	Type of NONPRIORITY unsecured		
	По	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
4.9 First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	9865	\$1,067.00
601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 10/16 Last Active 12/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
$\square$ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Future Income payments	Last 4 digits of account number		\$3,500.00
Nonpriority Creditor's Name 2505 Anthem Village Dr #E-578 Henderson, NV 89052	When was the debt incurred?		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		

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5/03/18 12:25PM

Debtor 1 Leora Porter Case number (if know) 4.1 Merrick Bank/CardWorks 3559 \$1,102.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/17 Last Active Po Box 9201 When was the debt incurred? 12/17 Old Bethpage, NY 11804 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 OneMain Financial 6350 \$5.374.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/18 Last Active Po Box 1010 When was the debt incurred? 3/05/18 Evansville, IN 47706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify 4.1 **Portfolio Recovery Associates** \$1,400.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd When was the debt incurred? Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main 5/03/18 12:25PM Document Page 23 of 50 Debtor 1 Leora Porter Case number (if know) 4.1 2736 \$3,655.00 Rise Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 8/07/17 Last Active 4150 International Plaza When was the debt incurred? 3/15/18 Fort Worth, TX 76109 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.1 Syncb/ccdstr 1289 \$728.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/17 Last Active Po Box 965036 When was the debt incurred? 4/27/18 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Charge Account** Other, Specify 4 1 Synchrony Bank/Walmart 1236 \$798.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 02/15 Last Active Po Box 965024 When was the debt incurred? 11/17 Orlando, FL 32896

Number Street City State Zlp Code

Who incurred the debt? Check one

■ Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim is for a community

debt Is the claim subject to offset?

■ No ☐ Yes

As of the date you file, the claim is: Check all that apply

☐ Contingent

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Account

Debtor 1 Leora Porter

Page 24 of 50 Case number (if know) Document

Po Box 9218   Mason, OH 45040   Number Street OF) State 2 D Code   When incurred the debt Orchock one.   Po Box 9218   Mason, OH 45040   Number Street OF) State 2 D Code   When incurred the debt Orchock one.   Debte 1 only   Unliquidated   Unliquidated   Debte 2 only   Debte 2 only   Debte 2 only   Debte 3 only   Debte 3 only   Debte 4 only   Debte 5 only   Debt	4.1 7	Visa Dept Store National Bank/Macy's	Last 4 digits of account number	4870 \$328.00
White incurred the debt? Chepk one.    Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 and Debtor 2 only   Debtor 4 and Debtor 2 only   Debtor 4 and Debtor 2 only   Debtor 4 only   Deptor 4 only   Debtor 4 only		Nonpriority Creditor's Name Po Box 8218 Mason, OH 45040		12/17
Debtor 2 only   Debtor 1 and Debtor 2 only   Disputed		•	As of the date you file, the claim	n is: Check all that apply
Debtor 1 and Debtor 2 only		Debtor 1 only	☐ Contingent	
At least one of the debors and another   Check if this claim is for a community debt   Student loans   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Student loans   Check if this claim is for a community debt   Check i		☐ Debtor 2 only	☐ Unliquidated	
Check if this claim is for a community debt   Check if this claim subject to offset?   Check if this claim is for a community of the claim subject to offset?   Check if this claim is for a community of the claim subject to the notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you were to someone else, list the original creditor in Parts 1 or 2, then list the collection agency is trying to collect from you for a debt you were to someone else, list the original creditor in Parts 1 or 2, then list the collection agency is trying to collect from you for a debt you were to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.  Capital One  Attr.: Bankruptcy  Po Box 30285  Satt Lake City, UT 84130  Last 4 digits of account number  Name and Address  Credit One Bank  Attr.: Bankruptcy  Po Box 98873  Last 4 digits of account number  Name and Address  Credit One Bank  Attr.: Bankruptcy  Po Box 98873  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Check one):  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.5 of (Chec		☐ Debtor 1 and Debtor 2 only	☐ Disputed	
Cottlegations arising out of a separation agreement or divorce that you did not report as priority claims		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:
Last 4 digits of account number  Name and Address Coefficion Services Inc. Do which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in P			_	
Debts to pension or profit-sharing plans, and other similar debts				paration agreement or divorce that you did not
Part 3: List Others to Be Notified About a Debt That You Already Listed				ing plans, and other similar debts
List Others to Be Notified About a Debt That You Already Listed  Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you list that by ou list the additional creditor's here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.  Name and Address  Capital One  Attn: Bankruptcy Po Box 30285  Salt Lake City, UT 84130  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Certified Services Inc Po Box 177  Waukegan, IL 60079  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Cerdit One Bank Attn: Bankruptcy Po Box 38873 Las Vegas, NV 89193  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Une 4.5 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecure			■ Other Specify Charge Ac	count
Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2. For example, if a collection agency have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, list the additional creditors?  Capital One Attn: Bankruptcy Po Box 30285  Salt Lake City, UT 84130  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Leat 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):  Part 1: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.8 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original credi			. ,	
is trying to collect from you for a debt you owe to someone else, list the driginal creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you on have more than one creditor for any of the debts that you listed in Parts 1 or 2, then list the collection agency here. Similarly, if you on have more than one creditor for any of the debts that you listed in Parts 1 or 1, then any debts in Parts 1 or 2, do not fill out or submit this page.  Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130  Last 4 digits of account number  Name and Address Certified Services Inc Po Box 177 Waukegan, IL 60079  Name and Address Credit One Bank Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  Name and Address Credit One Bank Attn: Bankruptcy Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address Credit One Bank Attn: Bankruptcy Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			•	
Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.3 of (Check one):  □ Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.3 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address  Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193  Last 4 digits of account number  Name and Address  Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address  Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one): □ Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	is try	ying to collect from you for a debt you owe to see more than one creditor for any of the debts the	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency here. Similarly, if you
Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Credit One Bank Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Credit One Bank Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Credit One Bank Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.6 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Credi				
Last 4 digits of account number	-			•
Name and Address Certified Services Inc PO Box 177 Waukegan, IL 60079  Name and Address Credit One Bank Attn: Bankruptcy PO Box 9873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one):    Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Credit				Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Certified Services Inc Po Box 177 Waukegan, IL 60079  Name and Address Credit One Bank Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.3 of (Check one):    Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority	Salt I	Lake City, UT 84130		
Certified Services Inc Po Box 177 Waukegan, IL 60079  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  Attr.: Bankruptcy Po Box 98873 Last Vegas, NV 89193  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 2: Creditors with Nonpriority Unsecured Claims			Last 4 digits of account number	
Po Box 177 Waukegan, IL 60079  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.6 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Attn: Bankruptcy Po Box 98873 Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 1: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Day 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number				
Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.6 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.8 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  Attn: Bankruptcy				
Credit One Bank Attn: Bankruptcy PO Box 98873 Las Vegas, NV 89193  Last 4 digits of account number  Con which entry in Part 1 or Part 2 did you list the original creditor?  Date of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims	Waul	kegan, IL 60079		Tart 2. Grounds Will Horizonty Grounds Graine
Credit One Bank Attn: Bankruptcy PO Box 98873 Las Vegas, NV 89193  Last 4 digits of account number  Con which entry in Part 1 or Part 2 did you list the original creditor?  Date of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  □ Part 2: Creditors with Priority Unsecured Claims	Nome	and Address	On which entry in Port 1 or Port 2 did yo	uu liet the original graditer?
Attn: Bankruptcy Po Box 98873 Last Vegas, NV 89193  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.7 of (Check one): Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  In Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  In Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  In Part 2: Creditors with Priority Unsecured Claims  In Part 2: Creditors with Priority Unsecured Claims  In Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  In Part 2: Creditors with Priority Unsecured Claims				_
Last 4 digits of account number    Contact Address   Contact Addre	Attn:	Bankruptcy		
Name and Address Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims				— Full 2. Groundle Will North Holly Chiecoured Claims
Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818  Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims  Con which entry in Part 1 or Part 2 did you list the original creditor? Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor? Part 2: Creditors with Priority Unsecured Claims	Las v	vegas, NV 89193	Last 4 digits of account number	
Po Box 7823 Edison, NJ 08818  Last 4 digits of account number  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number	Name	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.8 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 2: Creditors with Nonpriority Unsecured Claims  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Con which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Name and Address  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims			I	Part 2: Creditors with Nonpriority Unsecured Claims
First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks Attn: Bankruptcy  Part 2: Creditors with Priority Unsecured Claims	Euis	on, NJ 00010	Last 4 digits of account number	
First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks Attn: Bankruptcy  Part 2: Creditors with Priority Unsecured Claims	Name	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks  Attn: Bankruptcy  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims				
Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks Attn: Bankruptcy  Deart 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims			1	Part 2: Creditors with Nonpriority Unsecured Claims
First Premier Bank Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  Name and Address Merrick Bank/CardWorks Attn: Bankruptcy  Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims	Siou	x Falls, SD 5/11/	Last 4 digits of account number	
Po Box 5524 Sioux Falls, SD 57117  Last 4 digits of account number  Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks Attn: Bankruptcy  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	Name	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
Sioux Falls, SD 57117  Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks  Attn: Bankruptcy  Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims				
Last 4 digits of account number  Name and Address  On which entry in Part 1 or Part 2 did you list the original creditor?  Merrick Bank/CardWorks  Line 4.11 of (Check one):			ı	Part 2: Creditors with Nonpriority Unsecured Claims
Merrick Bank/CardWorks  Line 4.11 of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  Attn: Bankruptcy □ Part 2: Creditors with Nonpriority Unsecured Claims	SIOU	A Fails, 3D 3/ 11/	Last 4 digits of account number	
Merrick Bank/CardWorks  Line 4.11 of (Check one):  □ Part 1: Creditors with Priority Unsecured Claims  Attn: Bankruptcy □ Part 2: Creditors with Nonpriority Unsecured Claims	Name	and Address	On which entry in Part 1 or Part 2 did vo	u list the original creditor?
				_
			1	Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Leora Porter Case number (if know) Old Bethpage, NY 11804 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **OneMain Financial** Line **4.12** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims 601 Nw 2nd Street Evansville, IN 47708 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Rise Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Oi Box 101808 Fort Worth, TX 76185 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Syncb/ccdstr Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 96060 Part 2: Creditors with Nonpriority Unsecured Claims Orlando, FL 32896 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Synchrony Bank/Walmart Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept Part 2: Creditors with Nonpriority Unsecured Claims Po Box 965060 Orlando, FL 32896 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Visa Dept Store National** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Bank/Macy's

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Last 4 digits of account number

■ Part 2: Creditors with Nonpriority Unsecured Claims

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				-	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	_		0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	23,708.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	23,708.00

Attn: Bankruptcy Po Box 8053 Mason, OH 45040 Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main

Page 26 of 50 Document Fill in this information to identify your case: Debtor 1 **Leora Porter** Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	

	Case 18-13013 L	Docume		U5/U3/18 12.19.50	5/03/18 12:25PM
Fill in this	information to identify your		111111111111111111111111111111111111111		
Debtor 1	Leora Porter				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	her				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
people are ill it out, a our name	nd number the entries in the and case number (if known)	ally responsible for supp boxes on the left. Attach . Answer every question	lying correct informati the Additional Page to	ion. If more space is neede to this page. On the top of a	ed, copy the Additional Page,
1. 00	you have any codebtors? (If y	you are filing a joint case, o	to not list either spouse	as a codebtor.	
■ No					
☐ Yes	3				
	hin the last 8 years, have you na, California, Idaho, Louisiana,				tes and territories include
	Go to line 3.				
⊔ Yes	s. Did your spouse, former spou	ıse, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make s	sure you have listed the cr	th you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The credito Check all schedules tha	r to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	

State

City

ZIP Code

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	in this information to ide						-				
De	btor 1 Lec	ora Portei	ſ								
	btor 2 buse, if filing)					_					
Uni	ited States Bankruptcy C	ourt for the	: NORTHERN DISTRIC	T OF ILLINOIS		_					
	se number							k if this is:			
(If KI	nown)							n amende	_	g postpetition	chantar
										ollowing date:	
<u>O</u>	fficial Form 10	<u>6l</u>					M	M / DD/ Y	YYY		
S	chedule I: Yo	ur Inc	ome								12/1
atta		this form.	r spouse is not filing wi On the top of any addition								
1.	Fill in your employme information.	ent		Debtor 1				Debtor 2	or non-fil	ling spouse	
		f you have more than one job,		☐ Employed				☐ Employed			
	attach a separate page information about addit		Employment status	■ Not employed				☐ Not e	mployed		
	employers.		Occupation								
	Include part-time, seas self-employed work.	onal, or	Employer's name								
	Occupation may includ or homemaker, if it app		Employer's address								
			How long employed the	nere?				_			
Pai	rt 2: Give Details	About Mon	nthly Income								
	imate monthly income a		ate you file this form. If y	vou have nothing to r	report for	any	line, write	\$0 in the	space. Inc	lude your nor	n-filing
f yo	ou or your non-filing spou e space, attach a separa	se have mo te sheet to	ore than one employer, co	mbine the information	on for all e	emple	oyers for	that perso	n on the lir	nes below. If y	you need
							For Deb	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$		0.00	\$	N/A	
3.	Estimate and list mor	nthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Incor	<b>ne.</b> Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debtor	1 -	Leora Porter		Case nu	ımber ( <i>if known</i> )			
				For D	ebtor 1		Debtor 2 or filing spouse	
(	op\	/ line 4 here	4.	\$	0.00	\$	N/A	
				· —		· —		<u> </u>
5. <b>L</b>	ist a	all payroll deductions:						
	a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	C.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	e. f.	Insurance Domestic support obligations	5e. 5f.	\$	0.00	\$	N/A N/A	
	ig.	Union dues	5g.	\$	0.00	\$ 	N/A	
	h.	Other deductions. Specify:	5h.+	· · · · · · · · · · · · · · · · · · ·		⊦ \$—	N/A	
6. <i>I</i>	dd	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 	0.00	\$	N/A	_
			٠.	Ψ	0.00	Ψ	IN/F	1
	.ist a a.	all other income regularly received:  Net income from rental property and from operating a business,						
Ì	u.	profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	NI//	
۶	b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	ic.	Family support payments that you, a non-filing spouse, or a dependent	OD.	Ψ	0.00	Ψ	13/	<u> </u>
	-	regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	_	•		•		_
,		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	id. ie.	Unemployment compensation Social Security	8d. 8e.	\$	0.00	\$	N/A	
	f.	Other government assistance that you regularly receive	06.	Ψ	0.00	Ψ	N/A	<u> </u>
Ì	••	Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.	Of	<b>c</b>	0.00	æ	N1//	
9	g.	Specify:  Pension or retirement income	_ 8f. _ 8g.	\$	<u>0.00</u> 2,226.84	\$	N/A	
	h.	Other monthly income. Specify:	8h.+	· : —		+ \$—	N/A	
			_ "		0.00	_		<u>`</u>
). <i>I</i>	١dd	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,226.84	\$	N/	/A
10. <b>(</b>	alc	ulate monthly income. Add line 7 + line 9.	10. \$	2,	226.84 + \$		N/A = \$	2,226.84
P	\dd 1	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11. \$	State	all other regular contributions to the expenses that you list in Schedule	J.					
		de contributions from an unmarried partner, members of your household, your	depend	dents, y	our roommates	, and		
		friends or relatives.	woilah	lo to no	v ovnonogo ligte	od in Co	obodulo I	
	o ni Spec	ot include any amounts already included in lines 2-10 or amounts that are not a ifv:	avaliab	ie io pa	y expenses liste	ea in Sc	11. <b>+</b> \$	0.00
		•				_		
		the amount in the last column of line 10 to the amount in line 11. The res						
		that amount on the Summary of Schedules and Statistical Summary of Certain	n Liabii	lities and	d Related <i>Data</i>	if it	12. \$	2,226.84
6	ppli	es					ΙΖ	
							Comb	
13 <b>r</b>	)o v	ou expect an increase or decrease within the year after you file this form	2				montr	nly income
J. I	, · •	No.	•					
	-	Yes Explain:						

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Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Leora Porter	•			Ch	eck if this is:	
		Ecola i orici					An amended filing	g
	otor 2 ouse, if filing)					owing postpetition chapter of the following date:		
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
(II KI	nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Expen	ises				12/15
Be info	as complete ormation. If m	and accurate as	possible.	If two married people ar				
Par 1.	t 1: Desci	ribe Your House	hold					
••	No. Go to							
		es Debtor 2 live	in a separa	ate household?				
	_ 100. <b>20</b> 0		a copair					
			st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate Housel	hold of De	ebtor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						_ Pes
								□ No
								_ Yes
								□ No
								_ Yes
								□ No
3.	expenses o	penses include of people other t d your depende	han 🖂	No Yes			_	_
Par		ate Your Ongoi						
Est exp	imate your ex	xpenses as of y	our bankrı	uptcy filing date unless y	ou are using this fo lemental <i>Schedule</i>	orm as a s J, check	supplement in a Cl the box at the top	hapter 13 case to report of the form and fill in the
the		h assistance an		government assistance it luded it on <i>Schedule I: Y</i>			Your ex	penses
4.	The rental of	or home owners	hin exnen	ses for your residence. I	nclude first mortaage			
т.		nd any rent for th			norduo mar mortgage	4.	\$	400.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	•	erty, homeowner's				4b.	\$	0.00
				ipkeep expenses		4c.		0.00
	4d. Home	owner's associat	tion or cond	dominium dues		4d.	<b>a</b>	0.00

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

Debt	or 1	Leora Po	orter	Case num	nber (if known)	
6.	Utiliti	ies:				
-	6a.		heat, natural gas	6a.	\$	0.00
	6b.		wer, garbage collection	6b.	\$	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Spe		6d.	\$	0.00
7.	Food	•	ekeeping supplies	7.	·	575.00
			children's education costs	8.	·	0.00
			ry, and dry cleaning	9.		100.00
		•	products and services	10.		100.00
			ntal expenses	11.	·	75.00
			Include gas, maintenance, bus or train fare.			10.00
			ar payments.	12.	\$	275.00
			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			ributions and religious donations	14.	\$	0.00
		ance.			*	
			surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle in:	surance	15c.	\$	150.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
			clude taxes deducted from your pay or included in lines 4 or 20.			
	Speci		, , ,	16.	\$	0.00
17.	Insta	llment or le	ease payments:			
	17a.	Car payme	ents for Vehicle 1	17a.	\$	529.00
	17b.	Car payme	ents for Vehicle 2	17b.	\$	0.00
	17c.	Other. Spe	ecify:	17c.	\$	0.00
		Other. Spe		17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did not report	as	-	
	dedu	cted from	your pay on line 5, Schedule I, Your Income (Official Form 106	i). 18.	\$	0.00
19.	Othe	r payments	s you make to support others who do not live with you.		\$	0.00
	Speci			19.		
			erty expenses not included in lines 4 or 5 of this form or on Se			
	20a.	Mortgages	s on other property	20a.	·	0.00
	20b.	Real estat	e taxes	20b.	\$	0.00
	20c.	Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:		21.	+\$	0.00
			manth lu aynanaa			
		•	monthly expenses		•	0.004.00
			through 21.	2	\$	2,204.00
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	
	22c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	2,204.00
23	Calci	ulate vour	monthly net income.			
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,226.84
			monthly expenses from line 22c above.	23b.	·	2,204.00
	<b>2</b> JD.	Copy your	monthly expenses from the 220 above.	230.		۷,204.00
	23c	Subtract v	our monthly expenses from your monthly income.			
	200.		is your <i>monthly net income</i> .	23c.	\$	22.84
			- y			
24.	Do yo	ou expect a	an increase or decrease in your expenses within the year after	r you file this	s form?	
	For ex	cample, do yo	ou expect to finish paying for your car loan within the year or do you expect			e or decrease because of a
	_		terms of your mortgage?			
	■ No	Ο.				
	$\square \vee_{c}$	20	Explain here:			

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Fill in this i	information to identify your	case:			
Debtor 1	Leora Porter				
	First Name	Middle Name	Last Name		
Debtor 2	g) First Name	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case numb	er				
(if known)					Check if this is an
					amended filing
Official F	Form 106Dec				
		مريام المراام	l Dabtarla C	م ماریام م	
Decia	ration About a	an individua	Deptor's So	cneaules	12/15
£ 4	ad was who are filling to wath a			wast information	
i two mann	ed people are filing togethe	i, both are equally respo	onsible for supplying co	rrect information.	
You must fil	le this form whenever you fi	ile bankruptcy schedule	s or amended schedule	s. Making a false statement, cor	cealing property, or
			kruptcy case can result	in fines up to \$250,000, or impr	isonment for up to 20
ears, or bo	oth. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
	_				
	Sign Below				
Did yo	ou pay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
N	lo				
□ Y	es. Name of person				tition Preparer's Notice,
				Declaration, and Signa	ature (Official Form 119)
		that I have read the sun	nmary and schedules fil	ed with this declaration and	
that the	ey are true and correct.				
X /s/	Leora Porter		X		
	ora Porter		Signature o	of Debtor 2	
Sig	gnature of Debtor 1				
Do	ite May 3, 2018		Date		
Da	wiay 3, 2010		Date		

Eill in	this info							
		mation to identify you	case:					
Debto	or 1	Leora Porter First Name	Middle Name	Las	Name			
Debto	or 2							
(Spouse	e if, filing)	First Name	Middle Name	Las	Name	_		
United	d States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOI	5			
Case (if know	number <sup>'n)</sup>						_	heck if this is an mended filing
Stat Be as inform	complete	and accurate as possi nore space is needed,	Affairs for Indivi	are filing to	gether, both are	equally respons	sible for sup	
Part 1		n). Answer every ques Details About Your Ma	stion. rital Status and Where Yo	ou Lived Be	ore			
1. W		ır current marital statu			-			
_	_							
_	Married  Not ma	-						
_								
2. D	uring the	last 3 years, have you	lived anywhere other thar	n where you	live now?			
	No							
	Yes. Li	st all of the places you li	ved in the last 3 years. Do	not include v	here you live nov	٧.		
[	Debtor 1 P	rior Address:	Dates Debtor 1	1	Debtor 2 Prior Ad	ddress:		Dates Debtor 2 lived there
			ver live with a spouse or le					
states	and territo	ries include Arizona, Ca	lifornia, Idaho, Louisiana, N	evada, New	Mexico, Puerto R	lico, Texas, Wash	nington and W	risconsin.)
	No Yes. M	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form	106H).			
Part 2	Expla	in the Sources of You	r Income					
F	ill in the tot	al amount of income yo	nployment or from operati u received from all jobs and have income that you recei	l all business	es, including part	time activities.	revious caler	ndar years?
	No Yes. Fi	Il in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	Gross i (before exclusion	deductions and	Sources of in Check all that		Gross income (before deductions and exclusions)

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Page 34 of 50 Document Case number (if known) Debtor 1 Leora Porter Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until pension \$15,980.00 the date you filed for bankruptcy: For last calendar year: pension \$35,552.00 (January 1 to December 31, 2017) For the calendar year before that: \$35,552.00 pension (January 1 to December 31, 2016) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?  $\square$  No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for

Yes. List all payments to an insider.

**Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment paid still owe

Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main Document Page 35 of 50 Case number (if known) Debtor 1 Leora Porter Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment **Dates of payment** paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number Capital One Bank vs LEORA **JUDGMENT COOK COUNTY. ILLINOIS -**□ Pendina **PORTER 1ST MUNICIPAL DI** ☐ On appeal □ Concluded - 1,039.98 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο ☐ Yes Part 5: List Certain Gifts and Contributions

per person

Address:

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

Value

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave

the gifts

Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main 5/03/18 12:25PM Page 36 of 50 Document Case number (if known) Debtor 1 **Leora Porter** 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Swanson & Desai, LLC \$335 Attorney Fees, \$40 credit report, \$385.00 2314 W North Ave Unit C-1W \$10 copy costs Chicago, IL 60647

**Access Counseling** 633 W 5th Street Suite 26001 Los Angeles, CA 90071

kswanson@swansondesai.com

\$15.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Address

Description and value of any property transferred

Date payment or transfer was made

Amount of payment Debtor 1 Leora Porter

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
		No								
		Yes. Fill in the details.								
		rson Who Received Transfer dress		Description and very property transfer			payme	ibe any property or ents received or debts n exchange		ate transfer was nade
	Pe	rson's relationship to you					paia ii	. Oxonango		
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.)								d trust or similar device	of \	which you are a
		No		,						
		Yes. Fill in the details.								
	Na	me of trust		Description and v	alue of the pro	pert	y trans	ferred		ate Transfer was
Par	t 8:	List of Certain Financial Accounts, In	stru	ments, Safe Deposi	t Boxes, and S	tora	ge Unit	s		
20.		hin 1 year before you filed for bankruptod, moved, or transferred?	cy, w	ere any financial ac	counts or inst	rume	ents he	ld in your name, or for y	our	benefit, closed,
	Incl	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
		No Yes. Fill in the details.								
								<b>5</b>		
		me of Financial Institution and dress (Number, Street, City, State and ZIP le)		st 4 digits of count number	Type of acco instrument	ount	or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.		you now have, or did you have within 1 h, or other valuables?	year	before you filed for	bankruptcy, a	ıny s	afe dep	posit box or other depos	itor	y for securities,
		No Yes. Fill in the details.								
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)		De	scribe	the contents		Do you still have it?
22.	Hav	re you stored property in a storage unit	or pl	ace other than you	home within 1	1 yea	ır befor	e you filed for bankrupto	cy?	
		No Yes. Fill in the details.								
	_			Who also has or	and access	Do	cariba	the contents		Do you still
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)		De	SCIIDE	the contents		Do you still have it?	
Par	t 9:	Identify Property You Hold or Control	l for	Someone Fise						
23.		you hold or control any property that so			ude any propei	rty y	ou borr	owed from, are storing f	or,	or hold in trust
for someone.										
	_	No								
	Ц	Yes. Fill in the details.								
		/ner's Name dress (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		De	scribe	the property		Value
Par	t 10:	Give Details About Environmental Inf	forma	ation						
For	the p	ourpose of Part 10, the following definit	ions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or									

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Case number (if known) Document

Debtor 1 **Leora Porter** 

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.								
Rep	port all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.						
24.	Has any governmental unit notified you that yo	las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	y release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admini	istrative proceeding under any envi	ronmental law? Include settlements a	nd orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pa	rt 11: Give Details About Your Business or Co	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy.	did vou own a business or have an	v of the following connections to anv	business?					
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.								
	Business Name Do	escribe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper	Do not include Social Security number or ITIN.						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued							

Part 12: Sign Below

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Document

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Leora Porter Signature of Debtor 2 **Leora Porter** Signature of Debtor 1 Date May 3, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor 1

Leora Porter

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Fill in this inform	nation to identify your	case:		
Debtor 1	Leora Porter			
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
				_
Case number		_		☐ Check if this is an amended filing
Official Fo		( l l l l	d hards Ellin a the day Obser	
<u>Statemer</u>	<u>nt of Intentio</u>	n tor Indiv	<u>riduals Filing Under Cha</u>	pter / 12/15
you have leas You must file this whiche on the fi If two married pe sign an Be as complete a write yo	ver is earlier, unless the form expless the form expless the form expless the form.  In and accurate as possibute the form expless the form the for	nd the lease has n ithin 30 days after e court extends th in a joint case, both le. If more space is aber (if known).	ot expired. you file your bankruptcy petition or by the de e time for cause. You must also send copies th are equally responsible for supplying core s needed, attach a separate sheet to this form	to the creditors and lessors you list ect information. Both debtors must n. On the top of any additional pages,
	editor and the property the	nat is collateral	What do you intend to do with the propert secures a debt?	y that Did you claim the property as exempt on Schedule C?
name:	neMain Financial 2013 Toyota Venza	60000 miles	<ul> <li>□ Surrender the property.</li> <li>□ Retain the property and redeem it.</li> <li>■ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	□ No ■ Yes
securing debt:				
For any unexpire		ase that you listed	in Schedule G: Executory Contracts and Uni	
			expired leases are leases that are still in effethe trustee does not assume it. 11 U.S.C. § 30	
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea Property:	ased			☐ Yes
Lessor's name:				□ No

Description of leased Property: ☐ Yes Lessor's name: ☐ No

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main

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Debtor 1 Leora Porter Case number (if known) Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Leora Porter Signature of Debtor 2 Leora Porter Signature of Debtor 1

Date

Date

May 3, 2018

## Document Page 42 of 50

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

5/03/18 12:25PM

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

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## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-13013 Doc 1 Filed 05/03/18 Entered 05/03/18 12:19:56 Desc Main Document Page 46 of 50

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Leora Porter		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COM					
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplat	filing of the petition in bankruptcy,	or agreed to be paid	d to me, for services r		
	For legal services, I have agreed to accept		\$	1,000.00		
	Prior to the filing of this statement I have receive	ved	\$	335.00		
	Balance Due		\$	665.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed c	ompensation with any other person t	unless they are men	nbers and associates of	of my law firm.	
	☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the				law firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
Ì	<ul><li>a. Analysis of the debtor's financial situation, and r</li><li>b. Preparation and filing of any petition, schedules,</li><li>c. Representation of the debtor at the meeting of cr</li><li>d. [Other provisions as needed]</li></ul>	statement of affairs and plan which	may be required;	•	cruptcy;	
6.	By agreement with the debtor(s), the above-disclose	d fee does not include the following	service:			
		CERTIFICATION				
	I certify that the foregoing is a complete statement of cankruptcy proceeding.	f any agreement or arrangement for	payment to me for	representation of the	debtor(s) in	
N	lay 3, 2018	/s/ Joseph F Lenti				
	Date (	Joseph F Lentner				
		Signature of Attorney Swanson & Desai				
		2314 W North Ave	•			
		Chicago, IL 60647				
1		212-666-7992 Eav				

kswanson@swansondesai.com

Name of law firm

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### United States Bankruptcy Court Northern District of Illinois

		Totalian District of Hillions		
In re	Leora Porter		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	31
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and c	orrect to the best of my
Date:	May 3, 2018	/s/ Leora Porter Leora Porter		

Capital One 15000 Capital One Dr Richmond, VA 23238

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cash Net USA 200 West Jackson Suite 1400 Chicago, IL 60606-6941

Certified Services Inc 1733 Washington Street Waukegan, IL 60079

Certified Services Inc 1300 N Skokie Hwy Ste 10 Gurnee, IL 60031

Certified Services Inc Po Box 177 Waukegan, IL 60079

Chgo Po Ecu 10025 S Western Chicago, IL 60643

Credit One Bank Po Box 98875 Las Vegas, NV 89193

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Dr Leonard's/Carol Wright Gifts Po Box 2845 Monroe, WI 53566

Dr Leonard's/Carol Wright Gifts Po Box 7823 Edison, NJ 08818 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

First Premier Bank Po Box 5524 Sioux Falls, SD 57117

Future Income payments 2505 Anthem Village Dr #E-578 Henderson, NV 89052

Merrick Bank/CardWorks Po Box 9201 Old Bethpage, NY 11804

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

OneMain Financial Po Box 1010 Evansville, IN 47706

OneMain Financial Po Box 1010 Evansville, IN 47706

OneMain Financial Attn: Bankruptcy 601 Nw 2nd Street Evansville, IN 47708 OneMain Financial Attn: Bankruptcy 601 Nw 2nd Street Evansville, IN 47708

Portfolio Recovery Associates 120 Corporate Blvd Norfolk, VA 23502

Rise 4150 International Plaza Fort Worth, TX 76109

Rise Attn: Bankruptcy Oi Box 101808 Fort Worth, TX 76185

Syncb/ccdstr Po Box 965036 Orlando, FL 32896

Syncb/ccdstr Po Box 96060 Orlando, FL 32896

Synchrony Bank/Walmart Po Box 965024 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Visa Dept Store National Bank/Macy's Po Box 8218 Mason, OH 45040

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040